Build Better Bones
with
Dr. Fuhrman's Supplements

Gentle Care Formula

(multivitamin & mineral)

&

Osteo-Sun

(vitamin D, calcium, & magnesium)

Uniquely designed to work together to protect your bones

- **No vitamin A** - which can be damaging to bones and increases hip fracture rates
- **Optimal levels of vitamin D**- most multivitamins contain amounts shown to be ineffective
- **Most favorable ratio of vitamin D to calcium**
- **Most powerful form of vitamin K** - proven the most effective form of vitamin K for bone-building[1]

BEWARE OF MULTIVITAMINS: Most multivitamins contain beta carotene, vitamin A, vitamin E, copper and folic acid at levels that promote cancer and osteoporosis. They are actually more harmful than healthful!

Dr. Fuhrman's supplements are designed and updated with critical scientific information in mind The combination of Dr. Fuhrman's Gentle Care Formula with Osteo-Sun provides just the right level of micronutrients to protect bones, not too much and not too little, without the risks of overdosing from the overzealous use of supplemental ingredients.

Gentle Care Formula (multivitamin and mineral) contains extra vitamin D (800 IU) and the most effective form of vitamin K, K2, (instead of K1) for bone health[2]. This formulation avoids potentially toxic ingredients, such as vitamin A, beta carotene[3], folic acid, copper and iron. Too much of certain nutrients, including folic acid, has also been shown to have negative health effects and may promote breast cancer[4]. All of the ingredients are selected for optimal quality, absorption, and gentleness. This balanced antioxidant blend also offers phytochemical and carotenoid concentrates from green food extracts.

Buy Now

90-Day Supply
$38.95

Case of 12
$397.00

Osteo-Sun (vitamin D/Calcium/Magnesium) has a higher dose of vitamin D and a lower dose of calcium compared to other products. Recent medical studies document that vitamin D is more effective than calcium for protecting and building bone. In addition, vitamin D powerfully protects against cancer[5]. Too much calcium can actually interfere with the conversion of vitamin D into its biologically active form[6]. High dose calcium is not ideal for bone strength and may increase cancer risk as a result of lower vitamin D function. The modern world has an epidemic of vitamin D deficiency and most often a multivitamin containing the RDA for D is simply not sufficient to bring blood levels up to the ideal range, especially as we age[7].

Dr. Fuhrman's Osteo-Sun gives you the extra vitamin D you need and just the right levels of calcium and magnesium to maximize bone health.

Buy Now

Osteo-Sun contains vitamin D3 (cholecalciferol), the most potent and efficient form of vitamin D.

60-Day Supply
$24.95

Case of 12
$260.00

Osteo-Sun Vegan formulation utilizes vitamin D2 (ergocalciferol), a form of the vitamin which is obtained only from plant sources. Higher levels of vitamin D2 are used in this product to adjust for its lower vitamin activity.

60-Day Supply
$19.95

Case of 12
$212.00

The right supplements can make a huge difference in the health of your bones For example, recent studies show that antioxidant supplements can actually increase mortality rates instead of extending life expectancy. A meta-analysis revealed that vitamin A increased mortality rates by 16%, beta-carotene by 7%; and vitamin E by 4%[8]. Dr. Fuhrman does not

above what we receive in our diet.

Do not take VITAMIN A

Vitamin A (retinol) is associated with birth defects, and recent research suggests the dose that causes risk is much lower than previously thought. Research has shown it is linked to calcium loss in the urine and osteoporosis. For example, an important study found that subjects with a vitamin A intake in the range of 1.5 mg had double the hip fracture rate of those with an intake in the range of 0.5 mg[9]. For every 1 mg increase in vitamin A consumption, hip fracture rates increased by 68 percent. Most multivitamins contain about 5000 IUs of vitamin A, which is equal to 1.5 mg. This means most multivitamins are outdated and harmful to bones. Vegetables, contain beta carotene and other carotenoids, precursors of Vitamin A, which do not lead to excessive Vitamin A formation or cause calcium loss. Vitamin A supplements have also been documented to shorten lifespan[10]. Do not take vitamins that contain vitamin A.

The right amount of VITAMIN D is critical

Vitamin D is the sunshine vitamin, but since most people work indoors, most Americans have sub-optimal levels of this important vitamin that is the most critical determinant of bone density. Recent research studies have corroborated the fact that most Americans are vitamin D deficient. This deficiency occurred even among a majority of study subjects who were already taking a multivitamin with the standard 400 IUs of Vitamin D. That is simply not enough for bone protection and cancer protection. An additional 800 IUs of D3 or 2000 of D2 should be taken over and above the 400 typically present in a multiple vitamin. The way to know for sure if you are taking the right amount of vitamin D, or if the mixture of your sun exposure and Vitamin D intake is adequate is to test your blood for vitamin D - 25 hydroxy. Most women take an excessive amount of calcium, but insufficient amounts of vitamin D.

Not too much CALCIUM

Government advisory panels reviewed many calcium balance studies, which examine the point at which the amount of calcium consumed equals the amount of calcium excreted - suggest that a reasonable or adequate intake of calcium is about 550 mg/day, obtained from food and supplements.

It is now generally recognized that high-dose calcium supplements do not prevent or reduce the severity of osteoporosis more than low-dose supplements. A long-term, 18-year analysis showed that 600 mg of calcium was as effective as 1200 mg in preventing osteoporosis as long as adequate vitamin D was present. Low serum vitamin D levels correlated best with fracture risk[11].

Despite the debate surrounding milk and osteoporosis and how much calcium is ideal, one thing is clear: adequate calcium is important for reducing the risk of osteoporosis. When women supplement their diet with extra calcium, hip fractures do decrease and the combination supplement of 800 IUs of vitamin D with adequate calcium has been shown to reduce both bone loss and hip fractures.

Calcium should not be used in excessive doses and should be supplemented in the 400 - 600 mg range, not the 1000 - 2000 mg range. When real food supplies a good percentage of our calcium intake we also get the right balance of supportive phytonutrients to maximize bone health. Advice that might encourage total calcium intake (food plus supplementation) to approach or exceed 2,000 mg/day seems more likely to produce adverse effects and should be ignored.

Get Your FOLATE from food not supplements

Recently, there have been some troubling studies connecting folic acid supplementation and cancer[12]. Folate and folic acid are members of the B vitamin family. Folate is the form found naturally in fruits, vegetables, grains and other foods. Folic acid is the form found in supplements. Too much folate obtained naturally from food is not a concern. It comes naturally packaged in balance with other micronutrients and the body regulates its absorption[13].

Recent studies have shown that folic acid supplementation may be a double edged sword: getting enough may keep tumors from starting by repairing errors in DNA, but getting too much may feed tumors once they start[14]. It may play a dual role in cancer development by providing protection early in carcinogenesis and in individuals with a low folate status, but promoting carcinogenesis if administered later at higher intakes. This could affect people who may have an early stage tumor but are not aware it[15].

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[1]Iwamoto J, Takeda T, Ichimura S, et al. Effect of combined administration of vitamin D3 and vitamin K2 on bone mineral density of the lumbar spine in postmenopausal women with osteoporosis. J Orthop Sci 2000;5(6):546-51.
[2]Schurgers LJ. Teunissen KJ. Vitamin K containing dietary supplements: comparison of synthetic Vitamin K1 and natto derived menaquinone 7. Blood. 2007. 109(8) 3279-3283.
[3]Schurgers LJ. Dissel PE. et al. Role of vitamin K and vitamin K dependent proteins in vascular calcification. Z Kardiol. 2001. 90 Suppl 3:57-63.
Mayne ST. Beta-carotene, carotenoids, and disease prevention in humans. FASEB. 1996;10(7):690-701.
Goodman GE. Prevention of lung cancer. Current Opinion in Oncology 1998;10(2):122-126.
Kolata G. Studies Find Beta Carotene, Taken by Millions, Can't Forestall Cancer or Heart Disease. New York Times, Jan 19, 1996.
Omenn GS, Goodman GE, Thornquist MD, et al. Effects of a combination of beta carotene and vitamin A on lung cancer and cardiovascular disease. New England Journal of Medicine 1996;334(18);1150-1155.
Hennekens CH, Buring JE, Manson JE, et al. Lack of effect of long-term supplementation with beta carotene on the incidence of malignant neoplasms and cardiovascular disease. New England Journal of Medicine 1996;334(18):1145-1149.
Albanes D, Heinonen OP, Taylor PR, et al. Alpha-tocopherol and beta-carotene supplements and lung cancer incidence in the alpha-tocopherol, beta-carotene cancer prevention study: effects of base-line characteristics and study compliance. Journal of the National Cancer Institute. 1996;88(21):1560-1570.
Rapola JM, Virtamo J, Ripatti S, et al. Randomized trial of alpha-tocopherol and beta-carotene supplements on incidence of major coronary events in men with previous myocardial infarction. Lancet 1997;349(9067):1715-1720. D
Bjelakovic G, Nikolava D, Gluud LL, et al. Antioxidant supplements for prevention of mortality in healthy participants and patient with various diseases. Cochrane Database Syst Rev 2008;16(2):CD00776.
[4]Xu X, Gammon MD, Wetmur JG, et al. A functional 19-base pair deletion polymorphism of dihydrofolate reductase (DHFR) and risk of breast cancer in multivitamin users. Am J Clin Nutr 2007;85(4):1098-102.
[5]Vitamin D; Linus Pauling Micronutrient Information Center; Oregon State University; http://lpi.oreganstate.edu/inforcenter/vitamins/vitaminD/ date accessed: 8/29/08.
[6]Giovannucci E Cancer Causes Control 1998 Dec;9(6):567-82 Dietary influences of 1,25(OH)2 vitamin D in relation to prostate cancer: a hypothesis.
[7]Melamed, ML, MIchos ED, Post W, et al. 25-hydroxyvitamin D levels and the risk of mortality in the general population. Arch Intern Med 2008; 168:1629-1637.
Fuller KE, CAsparian JM. Vitamin D: Balancing cutaneous and systemic considerations. South Med J 2001; 94(1):58-64
[8]Bjelakovic G, Nikolava D, Gluud LL, et al. Mortality in randomized studies of antioxidant supplements for primary and secondary prevention: systematic review and meta-analysis. JAMA 2007 Feb 28; 297(8):842-57. Bjelakovic G, Nikolava D, Gluud LL, et al. Antioxidant supplements for prevention of mortality in healthy participants and patient with various diseases. Cochrane Database Syst Rev 2008;16(2):CD00776.
[9]Melhus H, Michaelson K, Kindmark A, et al. Excessive dietary intake of vitamin A is associated with reduced bone mineral density and increased risk of hip fracture. Ann Intern Med 1998;129(10):770-778.
[10]Bjelakovic G, Nikolava D, Gluud LL, et al. Antioxidant supplements for prevention of mortality in healthy participants and patient with various diseases. Cochrane Database Syst Rev 2008;16(2):CD00776.

[11]Feskanich D; Willett WC; Colditz GA. Calcium, vitamin D, milk consumption, and hip fractures: a prospective study among postmenopausal women. Am J Clin Nut 2003 Feb;77(2):504-11.
[12]Yi K. Does a high folate intake increase the risk of breast cancer? Nut Rev; 2006; 64(10PT1) 468-75. Cole B. Baron J. Sandler R. et al. Folic Acid for the Prevention of Colorectal Adenomas; JAMA; 2007;297(21):2351-2359. Stolzenberg-Solomon R. Chang S. Leitzman M. Folate intake, alcohol use and postmenopausal breast cancer risk in the Prostate, Lung, Colorectal and Ovarian Cancer Screening Trail; Am J Clin Nut; 2006; 83:895-904. Smith AD. Kim Y. et al. Is folic acid good for everyone? Am J Clin Nut; 2008; 87(3):517. Kim Y. Role of Folate in Colon Cancer Development and Progression; J Nutr; 2003 133(11 Supp1): 3731S-3739S. Guelpen BV. Hultdin J. Johansson I. et al. Low folate levels may protect against colorectal cancer; Gut; 2006;55:1461-1466.
[13]Harvard School of Public Health; The Nutrition Source: Keep the Multi, Skip the Heavily Fortified Foods; www.hsph.harvard.edu/nutritionsource/what-should-you-eat/folicacid/ Date accessed: 8/29/08.
[14]Ulrich C. Folate and cancer prevention: a closer look at a complex picture: Am J Clin Nut; 2007; 86(2)271-273.
[15]Xu X, Gammon MD, Wetmur JG, et al. A functional 19-base pair deletion polymorphism of dihydrofolate reductase (DHFR) and risk of breast cancer in multivitamin users. Am J Clin Nutr 2007;85(4):1098-102.

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